

RECEIVED

IN THE UNITED STATES DISTRICT COURT FOR
THE MIDDLE DISTRICT OF ALABAMA

2007 JAN 22 A 9:49

DEBRA P. HACKETT, CLK
U.S. DISTRICT COURT
MIDDLE DISTRICT ALA

Garry Damon Worthey
Full name and prison number
of plaintiff(s)

v.

Butler County Jail

Diane Harris "Sheriff"

Albert McKee "Administrator"

Name of person(s) who violated
your constitutional rights.
(List the names of all the
persons.)

CIVIL ACTION NO. 2:07CV63-WKW
(To be supplied by Clerk of
U.S. District Court)

I. PREVIOUS LAWSUITS

A. Have you begun other lawsuits in state or federal court
dealing with the same or similar facts involved in this
action? YES () NO (X)

B. Have you begun other lawsuits in state or federal court
relating to your imprisonment? YES () NO (X)

C. If your answer to A or B is yes, describe each lawsuit
in the space below. (If there is more than one lawsuit,
describe the additional lawsuits on another piece of
paper, using the same outline.)

1. Parties to this previous lawsuit:

Plaintiff(s) None

Defendant(s) None

2. Court (if federal court, name the district; if
state court, name the county) None

3. Docket number N/A

4. Name of judge to whom case was assigned N/A

5. Disposition (for example: Was the case dismissed? Was it appealed? Is it still pending?) N/A

6. Approximate date of filing lawsuit N/A

7. Approximate date of disposition N/A

II. PLACE OF PRESENT CONFINEMENT Fountain Correctional Facility

PLACE OR INSTITUTION WHERE INCIDENT OCCURRED
Butler County Jail, Greenville, AL.

III. NAME AND ADDRESS OF INDIVIDUAL(S) YOU ALLEGE VIOLATED YOUR CONSTITUTIONAL RIGHTS.

NAME

ADDRESS

1. Diane Harris Butler County

2. Albert M^{sc} Kee Butler County

3. _____

4. _____

5. _____

6. _____

IV. THE DATE UPON WHICH SAID VIOLATION OCCURRED July 2006

V. STATE BRIEFLY THE GROUNDS ON WHICH YOU BASE YOUR ALLEGATION THAT YOUR CONSTITUTIONAL RIGHTS ARE BEING VIOLATED:

GROUND ONE: Broke right hand, and never received proper treatment to correct hand

STATE BRIEFLY THE FACTS WHICH SUPPORT THIS GROUND. (State as best you can the time, place and manner and person involved.)

Was involved in a altercation with another state inmate Cedric Hasley and broke hand. Jail waited 3 weeks to send to Emergency room. Dr. at emergency room told Jail that I needed an MRI. Two weeks later got MRI. Never got treated
GROUND TWO: Sent mutable request of pain of hand.

Jail reply, would not pay for my hand.

SUPPORTING FACTS: Inclosed MRI and requests that I sent to Jail staff for help. which I never received.

GROUND THREE: After MRI never received anymore assistance and was transported to prison

SUPPORTING FACTS: Jail never wanted to get hand fix, and after sentencing was rushed out of county.

VI. STATE BRIEFLY EXACTLY WHAT YOU WANT THE COURT TO DO FOR YOU. MAKE NO LEGAL ARGUMENT. CITE NO CASES OR STATUTES.

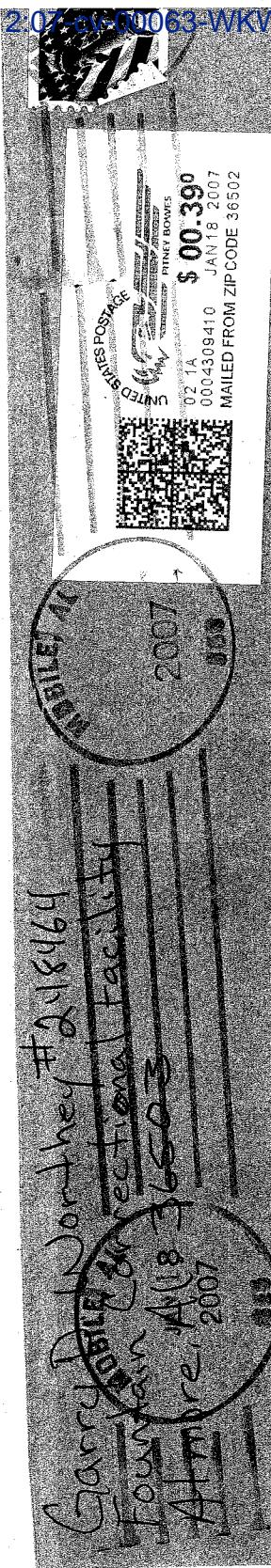
① Hand must be operated on to correct, ② All medical expenses paid. ③ Request \$100,000 in Damages and Pain & Suffering. All Legal fees & Atty fees paid. ④ Be granted Full Release from Conviction.

Mary Walker
Signature of plaintiff(s)

I declare under penalty of perjury that the foregoing is true and correct.

EXECUTED on 1-17-07
(Date)

Mary Walker
Signature of plaintiff(s)



United States District Court
Middle District of Alabama
Montgomery, AL
Post Office Box 711
Debra P. Hackett Clerk
Middle District Court Clerks

26130-0711

Exhibit A

Stabler Clinic, P.C.



300 North College Street
 Greenville, Alabama 36037
 Phone - (334) 382-2681
 Fax - (334) 383-9541

SSN 262-71-1870

DOB 6-14-72

Pensacola, FL 32508
 173 North Davis Hwy

Fax

To: Albert McKee From: Dr. Roger Smith (Barber)

Fax: 334-7491 Date: 9-1-06Phone: 382-3321 Pages: 2Re: Garry Worthy cc:

Urgent For Review Please Comment Please Reply Please Recycle

Comments: I contacted Dr. Centis office yesterday who referred me to Dr. McGowins office. I called them & they was going to talk to Dr. McGowin & get back with me as of right now I have not heard anything. I am going to

CONFIDENTIALITY NOTATION

The information contained in this Fax may be legally privileged and confidential information only for the individual or entity named above. If the reader of this message is not the intended recipient or agent of the intended recipient you are hereby notified that any dissemination distribution or copying of this teletype is strictly prohibited if you received this facsimile transmission in error, please notify this office at the above number. Thank You

→ Fax them & ask them to please call me.
 I will call at

Thank you,
 Barber. ①

SEP-01-2006 08:54 From: STABLER CLINIC

334 383 9541

To: 334 382 7491

P.2/2

L.V. STABLER MEMORIAL HOSPITAL
GREENVILLE, AL 36037

(B) EXHIBIT

Patient Name: WORTHEY, GARRY D
 Ordering Physician: Smith, R.
 DOB: 06/14/1972
 Exam Dt: 08/17/2006

Room #: OP
 Account #: 941496
 Film #: 155243

1 OF 1

RADIOLOGY REPORT

Hand swelling/right hand

MRI OF THE RIGHT HAND:

There is abnormal soft tissue signal over the dorsal surface of the third metacarpal phalangeal joint. This is more towards the ulnar side and the extensor tendon is displaced dorsally and towards the radial side. This is a non-specific mass-like soft tissue area and is felt to most likely be some type of inflammatory mass. The underlying bone appears within normal limits with no evidence of osteomyelitis.

IMPRESSION:

Abnormal mass-like soft tissue prominence over the dorsal surface of the third metacarpal phalangeal joint with some displacement of the extensor tendon as described. This is most likely some type of inflammatory reaction or inflammatory mass.

There is no evidence of underlying osteomyelitis.

SBW
Stanley B. Winslow, M.D.

DD: 08/18/2006
 DT: 08/18/2006
 SW/pc

Put in
Wound up
Hand surg

Exhibit
(3)

INMATE REQUEST FORM

NAME Garry Worthey DATE: 8-7-06 TIME:

TO: Judge Russell

- Telephone call
- Personal problem
- Notary
- Special visit
- Medical
- Sheriff
- Grievance
- Other

Talk to your attorney
McGowin Williamson
or to Al McKee,
the Jailer.

Jim

BRIEFLY OUTLINE YOUR REQUEST AND GIVE TO THE CORRECTIONS OFFICER

Sir, I was in a incident with another inmate and
broke my hand. I went to the hospital twice and the
doctor said that I need a MRI and surgery for them
to fix my hand. But the jail said that they were not
going to pay for me to go to surgery. Sir I am in
constant pain everyday. Could you please do something
so that I can get my hand fixed.

CORRECTIONS OFFICER Bruce Banks DATE 08-07-06

TIME GIVEN TO CORRECTIONS OFFICER 1200

*Exhibit
D*

INMATE REQUEST FORM

NAME Garry Worthy DATE: 8-10-07 TIME:

TO: Mr. McKee

- Telephone call
- Personal problem
- Notary
- Special visit
- Medical
- Sheriff
- Grievance
- Other

BRIEFLY OUTLINE YOUR REQUEST AND GIVE TO THE CORRECTIONS OFFICER

Sir, I really need your help to get my hand dealt with. This morning my hand is swollen even more and in pain. Sir please talk to someone so that I can get some help! The aspirin doesn't do any good. Please don't let this go on like this! Thanks for your concern! This is not a stunt

CORRECTIONS OFFICER J. Bullard DATE: 8-10-06

TIME GIVEN TO CORRECTIONS OFFICER 0750

I had a meeting with the Sheriff today on your hand, if you can convince THE Doctors or Specialist that you will pay them, the County will not pay.